PHA Plans

Streamlined Annual Version

U.S. Department of Housing and Urban Development Office of Public and Indian

Office of Public and Indian Housing

OMB No. 2577-0226 (exp. 08/31/2009)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief for certain types of PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

Streamlined Annual PHA Plan for Fiscal Year: 2007

PHA Name: The Housing Authority of the City of Itta Bena

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue.

PHA Name: The Housing Authority of the City of Itta Bena HA Code: MS121 $\,$

Streamlined Annual PHA Plan Agency Identification

PHA Name: Itta Bena	PHA	Number: MS121		
PHA Fiscal Year Beginni	ng: (mm/	yyyy) 09/2007		
PHA Programs Administ Public Housing and Section Number of public housing units: Number of S8 units:	n 8 □Se		ublic Housing Onler of public housing units	
PHA Consortia: (check)	box if subn	nitting a joint PHA P	lan and complete	table)
Participating PHAs	PHA Code	Program(s) Included in the Consortium	Programs Not in the Consortium	# of Units Each Program
Participating PHA 1:				
Participating PHA 2:				
Participating PHA 3:				
PHA Plan Contact Inform Name: Michelle Mason TDD: 662-254-9330 Public Access to Informat Information regarding any ac (select all that apply) PHA's main administrat	tion tivities out	_	houseauth301@be	ontacting:
Display Locations For PH	IA Plans	and Supporting D	ocuments	
The PHA Plan revised policies public review and inspection. If yes, select all that apply: Main administrative offi PHA development mana Main administrative offi Public library	Yes ice of the Plagement office of the lo	□ No. HA ices	,	
PHA Plan Supporting Documer Main business office of Other (list below)			(select all that app pment managemen	-

PHA Name: The Housing Authority of the City of Itta Bena HA Code: MS121

Streamlined Annual PHA Plan Fiscal Year 2007

[24 CFR Part 903.12(c)]

Table of Contents

[24 CFR 903.7(r)]

Provide a table of contents for the Plan, including applicable additional requirements, and a list of supporting documents available for public inspection.

A. PHA PLAN COMPONENTS

\boxtimes	1. Site-Based Waiting List Policies
903.7(b))(2) Policies on Eligibility, Selection, and Admissions
\boxtimes	2. Capital Improvement Needs
903.7(g)) Statement of Capital Improvements Needed
	3. Section 8(y) Homeownership
903.7(k))(1)(i) Statement of Homeownership Programs
	4. Project-Based Voucher Programs
\boxtimes	5. PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has
	changed any policies, programs, or plan components from its last Annual Plan.
\boxtimes	6. Supporting Documents Available for Review
\boxtimes	7. Capital Fund Program and Capital Fund Program Replacement Housing Factor,
	Annual Statement/Performance and Evaluation Report
\boxtimes	8. Capital Fund Program 5-Year Action Plan
	P & E 501-06

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

Form HUD-50076, <u>PHA Certifications of Compliance with the PHA Plans and Related Regulations:</u> <u>Board Resolution to Accompany the Streamlined Annual Plan</u> identifying policies or programs the PHA has revised since submission of its last Annual Plan, and including Civil Rights certifications and assurances the changed policies were presented to the Resident Advisory Board for review and comment, approved by the PHA governing board, and made available for review and inspection at the PHA's principal office;

For PHAs Applying for Formula Capital Fund Program (CFP) Grants:

Form HUD-50070, Certification for a Drug-Free Workplace;

Form HUD-50071, Certification of Payments to Influence Federal Transactions; and

Form SF-LLL &SF-LLLa, <u>Disclosure of Lobbying Activities</u>.

PHA Name: The Housing Authority of the City of Itta Bena HA Code: MS121

1. Site-Based Waiting Lists (Eligibility, Selection, Admissions Policies)

[24 CFR Part 903.12(c), 903.7(b)(2)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. Site-Based Waiting Lists-Previous Year

- 1. Has the PHA operated one or more site-based waiting lists in the previous year? Yes
- 2. If yes, complete the following table; if not skip to B.

Date Initiated	Initial mix of Racial, Ethnic or Disability Demographics	Current mix of Racial, Ethnic or Disability	Percent change
	Demographics	Demographics since Initiation of SBWL	between initial and current mix of Racial, Ethnic, or Disability demographics
06/1972	100% African American 60 % Disabled	99 % African American 1% White 70% Disabled	1%
)	6/1972	American 60 %	American 60 % American Disabled 1% White

- 2. What is the number of site based waiting list developments to which families may apply at one time? 1
- 3. How many unit offers may an applicant turn down before being removed from the site-based waiting list? 2
- 4. Yes No: Is the PHA the subject of any pending fair housing complaint by HUD or any court order or settlement agreement? If yes, describe the order, agreement or complaint and describe how use of a site-based waiting list will not violate or be inconsistent with the order, agreement or complaint below:

B. Site-Based Waiting Lists – Coming Year

If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to next component. No

1. How many site-based waiting lists will the PHA operate in the coming year?1

PHA Name: The Housing Authority of the City of Itta Bena Streamlined Annual Plan for Fiscal Year 2007 HA Code: MS121 2. Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)? If yes, how many lists? 3. \square Yes \boxtimes No: May families be on more than one list simultaneously If yes, how many lists? 4. Where can interested persons obtain more information about and sign up to be on the sitebased waiting lists (select all that apply)? PHA main administrative office All PHA development management offices Management offices at developments with site-based waiting lists At the development to which they would like to apply Other (list below) 2. Capital Improvement Needs [24 CFR Part 903.12 (c), 903.7 (g)] Exemptions: Section 8 only PHAs are not required to complete this component. Α. **Capital Fund Program** 1. \times Yes \cap No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B. 2. \square Yes \bowtie No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.). В. **HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund**) Applicability: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

1. Yes No: Has the PHA received a HOPE VI revitalization grant? (if no, skip to #3; if

copying and completing as many times as necessary).

yes, provide responses to the items on the chart located on the next page,

PHA Name: The Housing Authority of the City of Itta Bena HA Code: MS121 $\,$

3. Status of HOPE VI revitalization grant(s):

	HOPE VI Revitalization Grant Status							
a. Development Nam								
b. Development Num	nber:							
Revitalizat	tion Plan under development tion Plan submitted, pending approval tion Plan approved pursuant to an approved Revitalization Plan underway							
3. ☐ Yes ⊠ No:	Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year? If yes, list development name(s) below:							
4. Yes No:	Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:							
	Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:							
	ant Based AssistanceSection 8(y) Homeownership Program FR Part 903.12(c), 903.7(k)(1)(i)]							
1. ☐ Yes ⊠ No:	Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to the next component; if "yes", complete each program description below (copy and complete questions for each program identified.)							
2. Program Description:								
a. Size of Program Yes No:	Will the PHA limit the number of families participating in the Section 8 homeownership option?							
	If the answer to the question above was yes, what is the maximum number of participants this fiscal year?							

2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):

5. PHA Statement of Consistency with the Consolidated Plan

[24 CFR Part 903.15]

PHA Name: The Housing Authority of the City of Itta Bena HA Code: MS121

Other: (list below)

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary) only if the PHA has provided a certification listing program or policy changes from its last Annual Plan submission.

1. Co	onsolidated Plan jurisdiction: (Mississippi)
	ne PHA has taken the following steps to ensure consistency of this PHA Plan with the ensolidated Plan for the jurisdiction: (select all that apply)
	The PHA has based its statement of needs of families on its waiting lists on the needs expressed in the Consolidated Plan/s.
	The PHA has participated in any consultation process organized and offered by the
	Consolidated Plan agency in the development of the Consolidated Plan.
	The PHA has consulted with the Consolidated Plan agency during the development of
	this PHA Plan.
	Activities to be undertaken by the PHA in the coming year are consistent with the

3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

initiatives contained in the Consolidated Plan. (list below)

The Housing Authority of the City of Itta Bena has prepared this Agency Plan in compliance with Section 511 of the Quality Housing and Work Responsibility Act of 1998 and the ensuing HUD requirements. We received a certification from the State of Mississippi from Tommy James, Manager, stating our 2006 plan was consistent with the Consolidated Plan of the State of Mississippi. We are only updating our plan and not changing the underlying plan. We feel it is still consistent with the Consolidated Plan of the State of Mississippi and supported by the Consolidated Plan of Mississippi based upon the certification of Tommy James, Manager. A copy of the Certification may be obtained by contacting the Housing Authority of the City of Itta Bena.

PHA Name: The Housing Authority of the City of Itta Bena

HA Code: MS121

<u>6. Supporting Documents Available for Review for Streamlined Annual PHA Plans</u>

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review								
Applicable & On Display	Supporting Document	Related Plan Component						
X	PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans;	5 Year and Annual Plans						
X	PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan	Streamlined Annual Plans						
X	Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.	5 Year and standard Annual Plans						
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans						
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA's public housing and Section 8 tenant-based waiting lists.	Annual Plan: Housing Needs						
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources						
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies						
X	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies						
X	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. ☑ Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies						
N/A	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies						
X	Public housing rent determination policies, including the method for setting public housing flat rents. Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination						
X	Schedule of flat rents offered at each public housing development. Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination						
N/A	Section 8 rent determination (payment standard) policies (if included in plan, not	Annual Plan: Rent						

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A 20	List of Supporting Documents Available for Review	D.L. ID. C
Applicable & On Display	Supporting Document	Related Plan Component
	necessary as a supporting document) and written analysis of Section 8 payment standard policies. Check here if included in Section 8 Administrative Plan.	Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance
X	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self- Sufficiency
N/A	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
N/A	Any policies governing any Section 8 special housing types Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
N/A	Section 8 informal review and hearing procedures. ☐ Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
X	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
N/A	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing
X	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program (Sectionof the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Public Housing Community Service Policy/Programs ☐ Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
X	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
N/A	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G).	Annual Plan: Pet Policy

PHA Name: The Housing Authority of the City of Itta Bena

HA Code: MS121

List of Supporting Documents Available for Review							
Applicable & On Display	& On						
	☐ Check here if included in the public housing A & O Policy.						
X	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit					
N/A	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)					
N/A	Consortium agreement(s) and for Consortium Joint PHA Plans Only: Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations					

Statement for meeting 5 Year Plan Mission and Goals

The Housing Authority of the City of Itta Bena continues to seek qualified applicants by advertising our housing authority as a clean safe environment. We continue to be a high performer for financial management. We will continue to strive to be a Model Housing Authority. We investigate discrimination complaints, enforce the deconcentration policy, ensure that dwelling units meet housing quality standards, give preferences to families that are working, implement measures for income-mixing and follow our capital improvement plan.

The Housing Authority of the City of Itta Bena is meeting its goals by:

- Goal 1: We continue to inspect all public housing units annually using UPCS standards.
- Goal 2: We have counseled various residents on homeownership and pledge our support if they choose to pursue ownership.
- Goal 3: We implemented flat and ceiling rents and our policy will allow a choice in rent selection.
- Goal 4: We continue to ensure Equal Opportunity in housing for all applicants.
- Goal 5: Striving to improve the physical condition of the units and surrounding grounds.
- Goal 6: The PHA works closely with the city and county law enforcement agencies and obtains arrest information on any tenant for necessary appropriate action. We are in the process of planning our modernization work throughout our site.

Substantial Deviation from the 5-Year Plan Substantial Deviation Policy

Policy defining a substantial deviation and change in the agency plan

The Housing Quality and Work Responsibility Act of 1998 requires the Housing Authority to notify the Resident Advisory Board, the Board of Commissioners and the U.S. Department of Housing and Urban Development of any "substantial deviation" or "significant amendment" in

PHA Name: The Housing Authority of the City of Itta Bena HA Code: MS121

the Agency's annual plan and in the 5- year plan proposed modernization and capital improvement activities that have been previously approved and reported to HUD. The Housing Authority recognizes that it has a duty and responsibility to the residents, to the Resident Advisory Board, to the Commissioners and to the public to advise them of any substantial deviation or substantial change in the overall plan and any preplanned modernization work items. Therefore, the Housing Authority hereby defines a "substantial deviation" as any deletion or addition of any modernization work item that is greater than \$ 25,000, the addition or deletion of any new or old program or activity, any changes with regard to demolition, disposition, or designation of housing units, any homeownership programs or conversion activities, and any changes to rent or admission policies (except changes made to reflect changes in HUD regulatory requirements). A "significant amendment" would be changes in the use of replacement reserves under the Capital Funds program or the addition of non-emergency work items not included in the current annual plan that is greater than \$ 25,000.

The Executive Director is assigned the responsibility of making the required notifications to all interested and affected parties as described above of any "substantial deviation" or "significant amendment" to the Annual and Five-Year Plans as well as notification to the public of any material change, that is not defined above, that, in his or her opinion, should be made known to the public as good business practice.

		Grant Type and Number Capital Fund Program Gra Replacement Housing Fac	ant No: MS26P1215010 ctor Grant No:)7	Federal FY of Grant: 2007
	al Statement Reserve for Disasters/ Emergencies Rev				·
<u> Performance a</u> Line No.	nd Evaluation Report for Period Ending: Final Period Ending: Summary by Development Account	rformance and Evalua Total Estin	Total Ac	ctual Cost	
2220 1 100	Summing of Development Izecount	Original	Revised	Obligated	Expended
1	Total non-CFP Funds			gg	<u> </u>
2	1406 Operations	100,000.00			
3	1408 Management Improvements	100,000.00			
4	1410 Administration				
<u>.</u> 5	1411 Audit				
<u>5</u> 5	1415 Liquidated Damages				
7	1430 Fees and Costs				
3	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	20,976.00			
11	1465.1 Dwelling Equipment—Nonexpendable	·			
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	120,976.00			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504				
	compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

PHA Name: The Housing Authority of the City of Itta Bena		Grant Type and Number Capital Fund Program Grant No: MS26P12150107 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007			
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
MS121-001 & 002	Operations	1406		100,000.00				
MS121-001 & 002	Dwelling Structures Painting and Storage Door Threshold replacement	1460		20,976.00				
	Total			120,976.00				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule									
PHA Name: The Housin City of Itta Bena		che Grant Capita	Type and Nur al Fund Progra cement Housir	m No: MS26P12150	0107		Federal FY of Grant: 2007		
Development Number Name/HA-Wide Activities	Number (Quarter Ending Date) (Quarter Ending Date) ame/HA-Wide					Reasons for Revised Target Dates			
	Original	Revised	Actual	Original	Revised	Actual			
MS121-001 & 002	7/18/09			7/18/11					

Capital Fund Program Five-Year Action Plan Part I: Summary /Work activities								
PHA Name The Housing Authority o Itts Bena, Mississippi	f the City of			⊠Original 5-Year P □Revision No:	lan			
Development Year 1 Number/Name/HA-Wide		Work Statement for Year 2 FFY Grant: 2008 PHA FY: 2008	Work Statement for Year 3 FFY Grant: 2009 PHA FY: 2009	Work Statement for Year 4 FFY Grant: 2010 PHA FY: 2010	Work Statement for Year 5 FFY Grant: 2011 PHA FY: 2011			
	Annual Stateme nt							
HA Wide		75,000	90,000	90,000	90,000			
MS 121-001 & 002		64,573	49,573	49,573	49,573			
CFP Funds Listed for 5-year planning		139,573	139,573	139,573	139,573			
Replacement Housing Factor Funds								

_	ital Fund Program Five						
	porting Pages—Work						
Activities	Activities for Year :2 FFY Grant: 2008			Activities for Year: _3 FFY Grant: 2009			
for							
Year 1		HA FY: 2008	1	PHA FY: 2009			
	Development	Major Work	Estimated	Development	Major Work	Estimated	
	Name/Number	Categories	Cost	Name/Number	Categories	Cost	
See	HA Wide	Operations	75,000	HA Wide	Operations	75,000	
Annual				HA Wide	Architect/Consultant	15,000	
Statement	MS 121-001 & 002	Wrought Iron	64,573	MS 121-001 & 002	Wrought Iron	49,573	
		Fence			Fence		
	Total CFP Estimated	Cost	\$139,573			\$139,573	

	ital Fund Program Five							
Part II: Sup	pporting Pages—Work			,				
Activities	Activities for Year :_4			Activities for Year:5_				
for	FFY Grant: 2010				FFY Grant: 2011			
Year 1	PHA FY: 2010			PHA FY: 2011				
	Development Major Work		Estimated	Development	Major Work	Estimated		
	Name/Number	Categories	Cost	Name/Number	Categories	Cost		
See	HA Wide	Operations	75,000	HA Wide	Operations	75,000		
Annual	HA Wide	Architect/Consultant	15,000	HA Wide	Architect/Consultant	15,000		
Statement	MS 121-001 & 002	Roofing Renovation 15 units	49,573	MS 121-001 & 002	Roofing Renovation 15 units	49,573		
	Total CED Estimated	Cost	\$139,573			\$139,573		
	Total CFP Estimated	Cost	\$139,573			\$139,573		

PHA Name: The Housing Authority of the City of Itts Bena, Mississippi		Grant Type and Number Capital Fund Program Grant No: MS26P12150106 Replacement Housing Factor Grant No:				
	riginal Annual Statement Reserve for Dis erformance and Evaluation Report for Perio					
<u> </u>	Summary by Development Account		mated Cost	Total Act		
<u>e</u>		Original	Revised	Obligated	Expended	
1	Total non-CFP Funds	- 8		g		
2	1406 Operations	58,504.00	58,504.00	58,504.00	58,504.00	
3	1408 Management Improvements					
1	1410 Administration					
5	1411 Audit					
5	1415 Liquidated Damages					
7	1430 Fees and Costs					
3	1440 Site Acquisition					
)	1450 Site Improvement					
0	1460 Dwelling Structures	34,000.00	34,000.00	34,000.00	34,000.00	
1	1465.1 Dwelling Equipment—	2,064.99	2,064.99	2,064.99	2,064.99	
	Nonexpendable					
12	1470 Nondwelling Structures	25,907.02	25,907.02	25,907.02	23,469.50	
13	1475 Nondwelling Equipment	499.99	499.99	499.99	499.99	
4	1485 Demolition					
5	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collaterization or Debt Service					

	nal Statement/Performance and Evaluation Retal Fund Program and Capital Fund Program	-	ng Factor (CFP/CFP	RHF) Part I: Sumr	nary	
PHA N Mississ	Tame: The Housing Authority of the City of Itts Bena, sippi	Grant Type and Number Capital Fund Program Grant No: MS26P12150106 Replacement Housing Factor Grant No:				
	riginal Annual Statement Reserve for Disas					
Lin	rformance and Evaluation Report for Period Summary by Development Account		mated Cost	_	Total Actual Cost	
e						
		Original	Revised	Obligated	Expended	
20	1502 Contingency					
21	Amount of Annual Grant: (sum of lines 2 – 20)	120,976.00	120,976.00	120,976.00	118,538.48	
22	Amount of line 21 Related to LBP Activities					
23	Amount of line 21 Related to Section 504 compliance					
24	Amount of line 21 Related to Security – Soft Costs					
25	Amount of Line 21 Related to Security — Hard Costs					
26	Amount of line 21 Related to Energy Conservation Measures					

PHA Name: The Hou Mississippi	Grant Type and Number Capital Fund Program Grant No: MS26P12150106 Replacement Housing Factor Grant No:				Federal FY of Grant: 2006			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
Activities				Original	Revised	Funds Obligated	Funds Expended	
MS 121-001 & 002	Operations	1406		58,504.00		58,504.00	53,504.00	
MS 121-001 & 002	Dwelling Structures Interior Painting \$ 24,000 Replace Hot Water Heaters \$ 10.000 (20)	1460		34,000.00		34,000.00	34,000.00	
MS 121-001 & 002	Non Dwelling Structures Community Room Renovations	1470		25,907.02		25,907.02	23,469.50	
MS 121-001 & 002	Dwelling Equipment Refrigerators / Stoves	1465		2,064.99		2,064.99	2,064.99	
MS 121-001 & 002	Non Dwelling Equipment Pressure Washer	1475		499.99		499.99	499.99	
	Total			120,976.00		120,976.00	113,538.48	

Part III: Implem							1
City of Itta Rena Mississippi			Type and Nur al Fund Program cement Housin	m No: MS26P12150	Federal FY of Grant: 2006		
Development	All	Fund Obliga	ted	All	Funds Expende	ed	Reasons for Revised Target Dates
Number	(Quar	ter Ending I	Date)	(Qua	arter Ending Da	ite)	
Name/HA-Wide							
Activities	Activities						
	Original	Revised	Actual	Original	Revised	Actual	
MS 121-001 & 002	7/18/06			7/17/10			
-							